V/SB/17 (12-04v2)

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PTO/SB/17 (12-04v2)

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١	5% - 4h 42/004	\top	Complete if Known										
Fees pursuant to	Effective on 12/08/2 the Consolidated Appropri	18). /	Application Number		10/756,414-Conf. #2050								
FFF	E TRANSI	MITTAI	_	Filing Date		January 14, 20	04						
/			_	First Named Inve	entor	Takayuki HAT	TORI						
	For FY 20	105	E	Examiner Name		K. C. Egwim							
Applicar	nt claims small entity statu	JS. See 37 CFR 1.27	F	Art Unit		1713							
TOTAL AMOU	INT OF PAYMENT	(\$) 900.00	P	Attorney Docket N	No.	2927-0166P							
METHOD OF	PAYMENT (check	all that apply)											
X Check Credit Card Money Order None Other (please identify):													
Deposit Ac	ccount Deposit Account N	Number: 02-2448 Deposi	it Accour	nt Name:	Birch, Ste	ewart, Kolasch	& Birch, Li	LP					
For the	above-identified depo	sit account, the Direct	or is h	ereby authorize	d to: (ched	ck all that apply)							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee													
	Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCU		To and 1.17											
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l			SEAF	RCH FEES	EXAMIN	NATION FEES							
Application T	ype Fee (\$)	Small Entity	~ /\$\	Small Entity	Faa (\$)	Small Entity	Fees P	-id (¢)					
Utility	300 ree (\$)		<u>e (\$)</u> 500	<u>Fee (\$)</u> 250	Fee (\$) 200	<u>Fee (\$)</u> 100	Fees F	alu (ə)					
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Design	200		.00	50	130	65							
Plant	200		300	150	160	80							
Reissue	300		00	250	600	300							
Provisional	200	100	0	0	0	0							
2. EXCESS CL	AIM FEES							Small Entity					
Fee Description	•						Fee (\$)	<u>Fee (\$)</u>					
	er 20 (including Reissu	•					50	25					
	ent claim over 3 (inclu	iding Reissues)					200	100					
Multiple depend	dent claims						360	180					
Total Claims				<u>M</u>	Multiple Dependent Claims								
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Indep. Claims	Extra Claims	Fee (\$) Fe	ee Pai	id (\$)				_					
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3. APPLICATIO	ON SIZE FEE												
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listings und	der 37 CFR 1.52(e)), t	the application size fee	e due i	is \$250 (\$125 fo	or small er	ntity) for each ac	lditional 50						
sheets or fr	action thereof. See 3.	5 U.S.C. 41(a)(1)(G) a	and 37	/ CFR 1.16(s).									
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4. OTHER FEE	4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)													
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00													
SUBMITTED BY													
Signature	ny/Wel	Q# 36,613	Re (A	egistration No. attorney/Agent)	32,868	Telephone	(703) 205	-8000					
Name (Print/Type)	Andrew D. Meikle	<u> </u>				Date N	November 1	7, 2005					

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AME	WENT T	ΓRANSMI	TTAL LE	TTER		ocket No. 27-0166P	
Application No.		Filing	ľ	Examiner		Art Unit	
10/756,414-Conf. #2050		January 1	4, 2004	K. C. Egwin	<u> </u>	1713	
plicant(s): Tak	ayuki HATTOR	≀l et al.					
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he fee has beer	n calculated an	d is transmitte	d as shown b	elow.			
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	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	31	- 30 =	1	x 50.00		50.00	
Independent Claims	5	- 3 =	2	x 200.00		400.00	
Multiple Depend	lent Claims (ch	eck if applicabl	e)				
Other fee (pleas	e specify): E	Extension for res	ponse within s	econd month		450.00	
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Andrew & Mail	<u>elle 36</u>	,623		Dated:N	lovember	7, 2005	
Andrew D. Meik Attorney Reg. N	lo.: 32,868						
BIRCH, STEWA 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, Vi (703) 205-8000	ART, KOLASCI e Road irginia 22040-0		_P				
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